INPLASY

Prognostic significance of Hemoglobin–Albumin–Lymphocyte–Platelet (HALP) Score in Bladder Cancer: A systematic review and meta-analysis

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ADMINISTRATIVE INFORMATION

Support - No support.

Review stage at the time of initial registration - The review has not yet started.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 10 November 2026 and was last updated on 10 November 2026.

INTRODUCTION

Review question / Objective This systematic review and meta-analysis explored the association between Hemoglobin-Albumin-Lymphocyte-Platelet (HALP) score and bladder cancer (BC) prognosis.

Condition being studied Bladder cancer (BC) is one of the most commonly diagnosed malignancies globally and represents the predominant neoplasm of urinary system.

METHODS

Participant or population Patients with bladder cancer.

Intervention Not limited.

Comparator Not applicable.

Study designs to be included Not limitated.

Eligibility criteria Inclusion criteria were as follows: (1) the association between HALP score and the prognosis of BC was reported; (2) at least one of survival outcomes was reported; (3) hazard ratios (HRs) with 95% confidence intervals (CIs) were provided, or sufficient data for their calculation were available. Exclusion criteria were as follows: (1) studies were case reports, conference abstracts, editorials, reviews or animal studies; (2) studies had insufficient data for extraction on BC patient outcomes; (3) studies were duplicate publications or shared overlapping samples with another included study; (4) the full text was unavailable.

Information sources PubMed, Web of Science, Embase, the Cochrane Library, CNKI, Wanfang Database, and VIP Database.

Main outcome(s) Hazard ratios (HRs) with 95% confidence intervals (CIs).

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Quality assessment / Risk of bias analysis Two researchers independently assessed study quality using the Newcastle-Ottawa Scale (NOS). Disagreements were resolved through consensus with a third researchers.

Strategy of data synthesis Two researchers independently assessed study quality using the Newcastle-Ottawa Scale (NOS). Disagreements were resolved through consensus with a third researchers.

Subgroup analysis Subgroup analyses were performed to identify potential sources of heterogeneity.

Sensitivity analysis Sensitivity analysis was also performed to assess the impacts of individual studies on the pooled results.

Country(ies) involved Not limitated.

Keywords Bladder cancer; Prognosis; HALP Score; Systematic review; Meta-analysis.

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